

REMARKS

Claims 1, 3, 6-9 and 11-15 remain pending. Reconsideration of the application is respectfully requested.

Claims 6 and 7 were rejected under 35 USC §112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which Applicant regards as the invention. Claim 6 is amended to change the dependency from cancelled claim 2 to pending claim 1.

The Examiner rejected Claims 1, 3, 4, and 11-14 under 35 USC §103(a) as being unpatentable over Bazell et al. (USPN 3,884,242), in view of Inoue (USPN 5,100,386), stating in the Response to Arguments section that the proximal-most end of the Bazell et al. distal tip member is at (21) since it is the proximal-most end at least on the lumen side of the distal tip member (19).

Applicants have amended claims 1 and 13 to set forth that the distal tip member proximal-most end is adhesively secured to the balloon distal shaft section, and the proximal portion of the distal tip member extends distally from the proximal-most end along an outer surface of the catheter shaft. In contrast, in Bazell et al., shoulder (21) of the distal tip member (19) (which the Examiner takes as the proximal-most end of the distal tip member) is bonded to the shaft (2), and not to the balloon (16). Similarly, in Bazell et al., the distal tip member (19) does not have a proximal portion extending distally from the shoulder (21) along an outer surface of the catheter shaft. Support for the amendments to claims 1 and 13 can be found in Fig. 2 and paragraph [0026].

Although the distal tip member 19 of Bazell et al. does have a proximal-most end (22) secured to the balloon distal shaft section, and also has a proximal portion (i.e., flange 20) which extends distally from the proximal-most end (22) along an outer surface of the catheter shaft, the outer surface of the distal tip member (19) does not taper distally to a smaller outer diameter from the proximal-most end (22) toward the distal-most end of the distal tip member, as required by the embodiments of claims 1 and 13.

Specifically, in Figures 3 and 7 of the cited reference the structure of the distal tip member 19 is clearly shown as having a distal taper **in only its distal section**, i.e. between 21 and 26. The proximal section of the distal member, i.e. between 22 and 21 is shown and described as having a **proximal taper** (col 8, lines 6-8). As such, the cited reference teaches directly away from the present invention as claimed, to the extent that independent claims 1 and 13 specifically call for the distal tip member to have an outer surface that tapers distally from its **proximal-most end** to its distal-most end. It is therefore respectfully submitted that obviousness is effectively avoided.

Claims 1 and 13 require, *inter alia*, that the distal tip member has 1) a proximal-most end adhesively secured to the balloon distal shaft section, and 2) a proximal portion which extends distally from the proximal-most end along and adhesively secured to an outer surface of the catheter shaft, and 3) an outer surface tapering distally from the proximal-most end towards the distal-most end of the distal tip member. None of the references disclose or suggest such a configuration.

Claims 6-9 were rejected under 35 USC §103(a) as being unpatentable over Bazell et al. (USPN 3,884,242). In light of the non-obviousness of independent claim 1 as argued above, it is respectfully submitted that all claims depending therefrom similarly avoid obviousness.

The allowance of claim 15 is gratefully acknowledged.

In light of the above amendments and remarks, applicant earnestly believes the application to be in condition for allowance and respectfully requests that it be passed to issue.

Respectfully submitted,

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